

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL TEXTILE RENTAL SERVICES ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (TRSAPAC)		(Check if name is changed)	2. DATE February 10, 1993
(b) Number and Street Address 1130 East Hallandale Beach Blvd., Suite B		(Check if address is changed)	3. FED IDENTIFICATION NUMBER
(c) City, State and ZIP Code Hallandale, FL 33009			4. IS THIS STATEMENT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- (c) This committee supports/opposes only one candidate _____
Name of Candidate _____ Candidate Party Affiliation _____ Office Sought _____ State/District _____
and is NOT an authorized committee.
- (d) This committee is a _____ committee of the _____
(National, State or subordinate) _____ Party.
(Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Textile Rental Services Association of America (TRSA)	1130 East Hallandale Beach Blvd. Suite B Hallandale, FL 33009	TRSA is the trade association sponsoring TRSAPAC.

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative
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7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
John J. Courtney	Textile Rental Services Assn. of America 1130 East Hallandale Beach Blvd., Suite B Hallandale, FL 33009	Executive Director

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
John J. Courtney	Textile Rental Services Assn. of America 1130 East Hallandale Beach Blvd., Suite B Hallandale, FL 33009	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Union National Bank of Florida	10651 North Kendall Drive Miami, Florida 33176

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER

John J. Courtney

SIGNATURE OF TREASURER

DATE

2/1/93

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9630
Local 202-376-3120

FEC FORM 1
(revised 4/87)

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/>	First Class Mail	POSTMARKED <i>2-2-93</i>
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/>	Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/>	Other (Specify): <i>SLH</i>	POSTMARKED and/or DATE OF RECEIPT <i>2-4-93</i>
PREPARER		DATE PREPARED